## LOBBYIST MONTHLY REPORT FORM



State of Idaho

Ben Y sursa Secretary of State To Be Filed By:

L-3 LOBBYISTS (Sec. 67-6619)

Page of Page(s)
THIS SPACE FOR OFFICE USE ONLY

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SEGNETARY OF STATE STATE OF IDAHO

(Type or print clearly in black ink) See instructions at bottom of page										a inwun	
Lobbyis		ermanent busine				Date pr	repared	•	Period	covered	
`	Jon 4 910 1			3	3/14/05		(Mo	month ending			
Boise, 10 83702							•		2	P 28 05	
Item 1	I officially of all reportable expenditures made or incurred by Loppyist or by Loppyist's Employer on behalf of Loppyist's Employer.										
Category of Expenditure Reimbursed Personal Living and Travel Expenses Pertaining to Lobbying Activity  * Total Amount for All Employers				Proportionate amounts contributed by each employed Item 3, at bottom of page.)						rs, under	
Do	Not Have to be	Reported	All Elliployers	Employer No. 1		E	Employer No. 2		oyer No. 3	Employer No. 4	
Entertainment Food and Refreshment			s <u>O</u>	s <u>O</u>		_ \$-	s s			\$	
Living	Accommoda	itions				_  _					
Advertising						_  _					
Travel						_  _					
Telephone											
Other Expenses or Services								l			
Total \$			\$		_ \$_		\$		\$		
*When the number of employers you are reporting for requires multiple L-3 forms to be filed a total amount for all employers should be entered on Page 1.											
Item 2	The totals	of each expend	iture of more than fifty of Place	dollars (\$50	) for a le					Officials in Group	
	) A	X I V	riace		\$0	Julic	NA	or Lagistat	iora de l'uone e	vincials in Group	
,	177	1717			7		(47)				
	Continued on	attached page(s)					·				
INSTRUCTIONS						Item 3	Employer(s) Name(s) and Address(es)				
Who should file this form: Any lobbyist registered under Section 67-6617 Idaho Code.							No.1 910 May St. Ste 314 Roise 10 23702				
Filing deadline: Monthly reports due within ten (10) days of the month for activities of the past month.							No.2				
TO BE FILED WITH:  Ben Y sursa							No.3				
Secretary of State PO Box 83720											
Boise, ID 83720-0080 Phone: (208) 334-2852 Fax: (208) 334-2282											

	res made by the lobbyist or by the lobbyist's employer in the nature of contributions of money or other tangible or intangible property to any Legislator, or for or on behalf of any legislator.										
Date	Amount		Name of Legislator Receiving or Benefited								
Personal pr Date  Date  Date  Subject mail or House B the Lobbyis  Subject Code [from table] Legi	Amount  Amount  Comparison of proposed legislation, the lill, Resolution or other legislation, Resolution or Other Approximation, Resolution or Other Approximation or Other Approximat	number of the Senate	any legislator. Name of Legislator Receiving								
	I hereby certify that the above accordance with Section 67-66										